



## UVHS Pet & Family Matching Form

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This form  
expires in six  
months.



Full Name:				
Full Names of All Adults in Household:				
Physical Addresses:				
Mailing Address (if different):				
Home phone:		Other phone:		
Email address:				
Ages of children in or visiting your home:			Do you: <input type="checkbox"/> Own your home <input type="checkbox"/> Rent your home	
Are you under 21 years of age? <input type="checkbox"/> Yes <input type="checkbox"/> No		Place of employment:		
Current Pet's Name	Species	Gender	Age	Spayed or Neutered?
What veterinary clinic do you use?		Have you owned this type of animal before? <input type="checkbox"/> No <input type="checkbox"/> Yes		
Have you adopted from UVHS before? <input type="checkbox"/> No <input type="checkbox"/> Yes: when? _____		<p><b>By signing below, you agree to help the UVHS Behavior Team find you a pet that is a great match for you. If we don't have a match for you today, we will call you when one becomes available. Thank you so much for coming to UVHS for your next addition!</b></p> <p>Print Name: _____</p> <p>Signature: _____</p> <p>Today's Date: _____</p>		
<p><b>What type of animal are you interested in (check all that apply):</b></p> <p><input type="checkbox"/> Rabbit <input type="checkbox"/> Hamster <input type="checkbox"/> Gerbil <input type="checkbox"/> Mouse</p> <p><input type="checkbox"/> Hook Billed Bird (Parrot) <input type="checkbox"/> Soft Billed Bird (Dove)</p> <p><input type="checkbox"/> Chinchilla <input type="checkbox"/> Ferret <input type="checkbox"/> Small Bird (Parakeet)</p> <p><input type="checkbox"/> Other _____</p>				

## UVHS USE ONLY

**Picture ID/Valid License** \_\_\_\_\_ (date/initials)

**Introductions** \_\_\_\_\_ (date/initials)

family/children

**NOTES: Matchmaker:** \_\_\_\_\_ (date/initials)